

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 MCGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
 County of Spartanburg
 Township of Kempbello
 OR
 Inc. Town of.....
 OR
 City of *By Court Order dtd. 5-18-84, *HELEN CALDWELL KNOX
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only
5722

Registration District No. 408 Registered No. 21
(For use of Local Registrar)

(2) Full Name of Child Caldwell If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Male</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>*Feb 18, 1922</u> <u>Feb 20, 1922</u> <small>(Name of Month) (Day) (Year)</small>
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MOTHER.

(14) NAME BEFORE MARRIAGE Annie Caldwell

(15) PRESENT POSTOFFICE OF MOTHER Inman

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18
(Years)

(18) BIRTHPLACE Spets Co. S.C.

(19) OCCUPATION School

(20) Number of children born to mother, including present birth 1
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 a. M.,
 on the date above stated. Born Alive or stillborn (Hour A. M. or P. M.)

(23) (Signature) W. J. Chapman, M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physic or Midwife Inman

Given name added from a supplemental report

 _____, 19 _____
 Registrar

(26) Witness E. Calders
(Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb 22 1922 (28) E. Calders
Local Registrar.

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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